



10 Good Reasons NOT to Vaccinate Your Babies



VACCINATION IS A PERSONAL CHOICE THAT SHOULD BE MADE IN THE CONTEXT OF A REASONABLY BROAD UNDERSTANDING OF THE RISKS AND BENEFITS OF THE VACCINE AND THE DISEASE.

QUICK REFERENCE

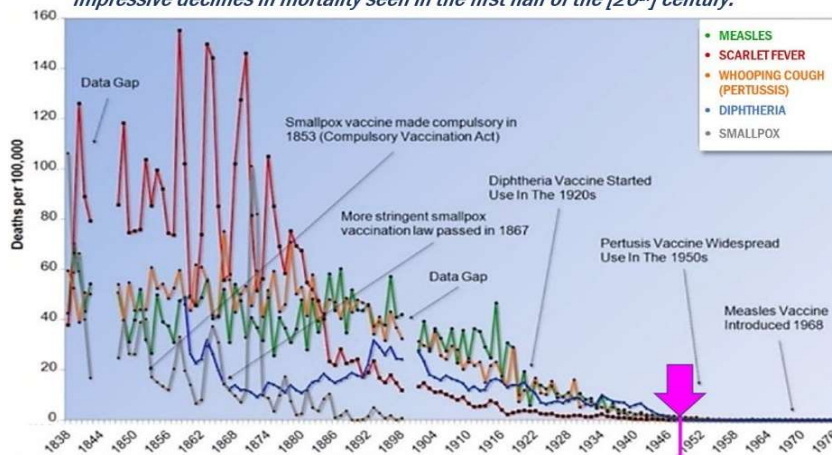
1. Common diseases aren't as bad as we're told; better living conditions (not vaccines) reduced disease deaths.
2. Almost no vaccines have been safety tested against a harmless placebo.
3. Phase 1 safety trials are too short to reveal significant side effects.
4. Adjuvants are known toxins added to many vaccines to artificially keep the immune system on high alert.
5. Aluminum in vaccines that reaches the brain can trigger lifelong neurological and autoimmune dysfunction.
6. Aluminum and mercury in vaccines are associated with autism.
7. Immune support with preventives and treatments promote long-lasting natural immunity.
8. Unvaccinated people are generally healthier than the vaccinated.
9. Vaccines are cash-cows for Pharma and the politicians and bureaucrats they own.
10. Vaccines are legally classified as "unavoidably unsafe."

1. The diseases aren't nearly as scary as we've been told.

Fear is the most powerful tool Pharma has in its marketing arsenal. And that fear starts when we believe the lie that the vaccine-targeted diseases are all: (a) painful to endure, (b) often crippling or deadly, and (c) easy to catch and spread.

The truth is that most of the diseases kids get vaccinated for had already stopped killing people *before* vaccines were widely used.¹

AMERICAN ACADEMY OF PEDIATRICS: "[V]accination does NOT account for the impressive declines in mortality seen in the first half of the [20th] century."



Measles, for example, killed fewer than 500 people/year in the mid-1950s when *virtually everybody got measles*. That's a death rate *lower* than that of the flu today. And that was before we knew that measles infection depletes the body of vitamin A. Today, we may be able to prevent most of those measles deaths simply by supplementing vitamin A.

The **BENEFITS** of getting measles include earning virtually lifelong natural immunity (CDC still considers merely being born before 1957 as proof of immunity)², and a reduced risk of certain cancers later in life.³

Remember: the **plague, Spanish flu, cholera, and typhoid, yellow fever, and scarlet fever all went away without vaccines**. Why? Because we are healthier today thanks to better living conditions in modern societies. We no longer live in filth surrounded by rats and fleas. We have public sanitation, indoor plumbing, fresh water to drink and wash with, refrigerated and fresh food, and we have a host of supplements and medicines to help us prevent and treat diseases, if needed.



This information is for educational purposes only. Please conduct your own research and consult relevant professionals for specific advice.

2. Vaccines are almost never safety tested against placebos.

Double-blind, placebo-controlled testing is the only way to know whether a new vaccine is better or safer than doing nothing. If more problems occur in the vaccinated subjects than those on the placebo, they are likely caused by the new vaccine.

But in the real world, almost no vaccines have been safety-tested against a “control group” receiving harmless saline placebo injections.

Almost all vaccines in use today have been tested against either the most toxic ingredient in the vaccine (usually aluminum) or against an already-approved vaccine.

Doing so allows vaccine makers to downplay the harms of a new vaccine by showing it is no more harmful than other approved shots. But equal harm is certainly not proof of safety.

3. Safety tests are too short to reveal significant side effects.

Most Phase 1 safety trials monitor subjects for only a few days, rarely more than a few weeks. The studies of the two most popular Hep B vaccines given to nearly all newborn babies only monitored safety in test subjects for 4 to 5 days—not even remotely long enough to identify significant side effects.^{4, 5}

Hep B Vaccine	# Subjects	Monitor Time	Approved
Recombivax HB	147	5 days	1986
Engerix B	5,071	4 days	1989

But, don't the longer Phase 2-3 trials with more subjects identify more risks? Not if they only ask subjects about a few side effects, make it hard to report off-list problems, and arbitrarily define which problems weren't caused by the shot.

4. Some vaccines use toxins to irritate the immune system.

Adjuvants are toxins (usually aluminum) added to many vaccines to provoke the immune system to react to bits of the targeted germ (antigens) more strongly than it normally would with just the antigen. These toxic adjuvants are designed to keep your immune system on high alert longer, still causing inflammation and making antibodies, when normally it would stand down after a natural infection, with memory cells ready to make new antibodies faster if the germ circulates again later.

Chronic inflammation (from persistent vaccine toxins and other sources) can cause a variety of illnesses including cardiovascular disease, ADHD, autism, and autoimmune diseases like allergies, asthma, arthritis, and diabetes.

5. Aluminum stuck in the brain can trigger lifelong disabilities.

The body can fairly easily eliminate *ingested* (eaten or drunk) aluminum. But when *injected* in a vaccine, aluminum can reach the brain where it can't get out. It constantly irritates the brain and nervous system, potentially causing many lifelong neurological or neurodevelopmental problems, including autism.⁶

6. Aluminum and mercury in vaccines may lead to autism.

Contrary to the CDC's ongoing claim that “Vaccines do not

cause autism,” they have provided no proof for that claim in response to FOIA requests. More importantly, Dr. Chris Exley, the world's leading expert on aluminum and the brain, observes that the brains of autism and Alzheimer's victims always contain excessive amounts of aluminum. He concludes that there is NO safe amount of aluminum in the brain.⁷

Mercury, however, has been removed from most childhood vaccines but still remains in some multi-use vials of flu vaccines.

7. Preventives and treatments promote natural immunity.

Natural immunity, earned by recovering from natural infection, is far superior to any “vaccine immunity.” That's why the CDC considers merely being alive before 1957 as proof of lifetime immunity to measles, mumps and rubella.

Respiratory infections can be prevented or minimized by gargling with mouthwash and rinsing the sinuses. Routine and preventive immune support with vitamin C and D, zinc and quercetin helps the body replenish supplies drained in fighting infection and helps stop viral replication in cells.⁸ Vitamin A supplements replenish the A used in fighting off measles.^{9 10}

And doctors have a wealth of super-safe, effective, and cheap drugs to fight both bacterial (antibiotics) and viral (antivirals, antiparasitics,¹¹ and zinc) infections. Instead of using vaccines that can create lifelong damage for diseases we may never get, we can support our immune systems daily, and wait till we're at risk of exposure to implement some helpful preventive tactics or use treatments we will only need for a few days.

8. Vaccine-free people are healthier than the vaccinated.

Curiously, government refuses to study the overall health of the vaccinated vs. the unvaccinated. But those who have done such studies have found that vaccine-free people have far fewer chronic illnesses, far fewer cancers, and are healthier overall.¹²

And indeed, research shows that having caught and recovered from those typically-mild childhood illnesses with fevers may protect us against certain cancers later in life.³

9. Vaccines: cash-cows for Pharma and their pet politicians.

Expressions like “Follow the money” and “Cui bono” (“Who benefits?”) warn us that when someone benefits from a product, we should automatically assume their efforts to promote or force the use of that product are designed to expand their own wealth or power, not to serve us, the public.

10 Vaccines are legally classified as “unavoidably unsafe.”

Yes, despite all the “safe and effective” claims, vaccines fall into the same category as drugs, guns, and chainsaws.^{13, 14} The law assumes certain products can't be made completely safe, so they're allowed to be sold as long as the manufacturer: (a) fully discloses the potential harms, and (b) provides instructions for safest possible use. Now, think about that: We know how to use drugs, guns and chainsaws safely. But there is no way to use a vaccine “safely.” It's like Russian Roulette: you either take it and hope for the best, or you “just say no” and refuse to play.

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Who Does Not Need MMR Vaccine?

You do not need measles, mumps, and rubella (MMR) vaccine if you meet any of these criteria for presumptive evidence of immunity*:

- You have written documentation of adequate vaccination:
 - at least one dose of a measles, mumps, and rubella virus-containing vaccine administered on or after the first birthday for preschool-age children and adults not at high risk for exposure and transmission
 - two doses of measles and mumps virus-containing vaccine for school-age children and adults at high risk for exposure and transmission, including college students, healthcare personnel, international travelers, and groups at increased risk during outbreaks
- You have laboratory confirmation of past infection or had blood tests that show you are immune to measles, mumps, and rubella.
- You were born before 1957.**

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